

**FOR PARTNERSHIPS ONLY**

CERTIFICATE REQUIRED TO BE FILED BY CO-PARTNERS CONDUCTING BUSINESS IN THE  
COMMONWEALTH OF VIRGINIA UNDER AN ASSUMED OR FICTITIOUS NAME.

We, the undersigned, do hereby certify in accordance with the provisions of §59.1-69 of the 1950 Code of Virginia that we are conducting as co-partners the business of

\_\_\_\_\_  
(Type of Business)

at \_\_\_\_\_,  
(Street Address) (City) (State) (Zip Code)

Fairfax County, Virginia, under the name of:

\_\_\_\_\_  
(Name of Business)

that the full names of each and every person composing the said co-partnership and owning the said partnership business, with their respective post office and residence addresses, are:

FULL NAME	ADDRESS	PHONE NUMBER
-----------	---------	--------------

<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

that the name and style of the firm is as herein above set forth, the length of time for which the partnership is to continue is indefinite, and the locality of our place of business is as herein above shown.

Given under our hands this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

<hr/>	<hr/>
<hr/>	<hr/>

Commonwealth of Virginia

County of Fairfax, to-wit:

I, the undersigned Deputy Clerk (Notary Public) in and for the Commonwealth and County aforesaid, do hereby certify that

\_\_\_\_\_, whose names are signed to the foregoing and hereunto annexed Certificate dated the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, have each this day personally appeared before me and acknowledged the same before me in my office.

Given under my hand this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My Commission Expires : \_\_\_\_\_

\_\_\_\_\_  
**Deputy Clerk (Notary Public)**

In the Clerk's Office of the Circuit Court of Fairfax County, Virginia \_\_\_\_\_, \_\_\_\_\_,  
at \_\_\_\_\_ o'clock \_\_\_\_M, this Certificate with the Certificate of Acknowledgement annexed, was recorded and filed  
and admitted to record.

**TESTE:      JOHN T. FREY, CLERK**

**BY:**

\_\_\_\_\_  
**Deputy Clerk**